



GOVERNMENT OF THE DISTRICT OF COLUMBIA
OFFICE OF CAMPAIGN FINANCE
WASHINGTON, D.C. 20009

REPORT OF RECEIPTS AND EXPENDITURES
FOR CANDIDATES, PRINCIPAL CAMPAIGN OR POLITICAL COMMITTEES,
POLITICAL ACTION COMMITTEES, INDEPENDENT EXPENDITURE COMMITTEES

SUMMARY PAGE

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) Holmes for Ward 8	2. OCF Identification Number PCCCC8166829
Address 1527 17th Street, SE	3. Is this report an Amendment? (Yes or No) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City, State and Zip Code Washington, DC 20020	

4. TYPE OF REPORT: **June 10th Report**

This REPORT contains activity for: **Primary Election**

SUMMARY	COLUMN A THIS PERIOD	COLUMN B CUMULATIVE TO-DATE
5. Covering Period 3/11/2016 through 6/10/2016		
6. (a) Cash on Hand (January 31 Year End Report Only)		\$ 0.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 1,541.58	
(c) Total Receipts [from Line (16)]	\$ 7,104.82	\$ 9,217.08
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	\$ 8,646.40	
7. Total Expenditures (from Line 22)	\$ 8,646.40	\$ 9,217.08
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	\$ 0.00	
9. Debts and Obligations Owed BY the Committee or the Candidate (itemize all on Schedule D)	\$ 0.00	\$ 0.00
10. (a) Loans Owed BY the Committee or Candidate (itemize all on Schedule E)	\$ 0.00	\$ 0.00
(b) Loans Owed TO the Committee or Candidate (itemize all on Schedule E-1)	\$ 0.00	\$ 0.00

CERTIFICATIONS/OATHS AND AFFIRMATIONS OF FILERS OF REPORTS OF RECEIPTS AND EXPENDITURES

(1) OATH OR AFFIRMATION OF CANDIDATE IF FILING

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY, THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT I USED ALL REASONABLE DUE DILIGENCE TO ENSURE THAT I AND THE POLITICAL COMMITTEES AFFILIATED/AUTHORIZED BY MY CAMPAIGN ARE IN COMPLIANCE WITH THE REPORTING REQUIREMENTS OF THE DISTRICT OF COLUMBIA CAMPAIGN FINANCE ACT OF 2011, AND HAVE ADVISED ALL CONTRIBUTORS OF THE OBLIGATIONS IMPOSED ON CONTRIBUTORS BY THE CAMPAIGN FINANCE ACT.

TYPE OR PRINT FULL NAME OF CANDIDATE

SIGNATURE OF CANDIDATE

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

(2) OATH OR AFFIRMATION OF COMMITTEE TREASURER

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE, CORRECT AND COMPLETE.

Mr. Stephen Seh

TYPE OR PRINT FULL NAME OF TREASURER

ELECTRONICALLY CERTIFIED

06/10/2016

SIGNATURE OF TREASURER

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

(3) OATH OR AFFIRMATION OF COMMITTEE TREASURER OF INDEPENDENT EXPENDITURE COMMITTEE

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT THE COMMITTEE HAS MADE NO CONTRIBUTIONS OR TRANSFER OF FUNDS TO ANY PUBLIC OFFICIAL OR CANDIDATE, ANY POLITICAL COMMITTEE, OR ANY POLITICAL ACTION COMMITTEE.

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

(4) OATH OR AFFIRMATION OF COMMITTEE TREASURER OF POLITICAL ACTION COMMITTEE

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT THE CONTRIBUTIONS RECEIVED BY THE COMMITTEE AND THE EXPENDITURES MADE HAVE NOT BEEN CONTROLLED OR DIRECTED BY ANY PUBLIC OFFICIAL OR CANDIDATE, ANY POLITICAL COMMITTEE, OR ANY POLITICAL PARTY.

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

**DETAILED SUMMARY PAGE
OF RECEIPTS AND EXPENDITURES
OCF Form 16, Page 2**

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) Holmes for Ward 8	REPORT COVERING THE PERIOD FROM: 3/11/2016 TO: 6/10/2016	
I. RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B CUMULATIVE TO-DATE CUMULATIVE YEAR-TO-DATE
11. CONTRIBUTIONS (OTHER THAN LOANS) FROM:		
(a) Individuals/Organizations Other Than Political Committees (Schedule A)	\$ 5,952.00	\$ 7,565.44 11(a)
(b) Political Party Committees (Schedule A-1)	\$ 0.00	\$ 0.00 11(b)
(c) Political Committees Other than Pol. Comms. Authorized by the same Candidate (Schedule A-2)	\$ 0.00	\$ 0.00 11(c)
(d) The Candidate (Schedule A-3)	\$ 1,152.82	\$ 1,651.64 11(d)
(e) Transfers From Authorized Committees of the Candidate identified in this Report (Schedule A-4)	\$ 0.00	\$ 0.00 11(e)
(f) Itemized Monetary Contributions received in excess of \$10,000 from source not associated with the candidate or committee (Schedule A-7)	\$ 0.00	\$ 0.00 11(f)
(g) Total Contributions (Other than Loans) [add lines 11(a), (b), (c), (d), (e) and (f)]	\$ 7,104.82	\$ 9,217.08 11(g)
12. SALES AND COLLECTIONS (Schedule C)	\$ 0.00	\$ 0.00 12
13. LOANS		
(a) Loans owed BY The Candidate/PCC or the Committee (Schedule E)	\$ 0.00	\$ 0.00 13(a)
(b) Loans owed TO The Candidate/PCC or the Committee (Schedule E-1)	\$ 0.00	\$ 0.00 13(b)
(c) Total Loans [add Lines 13(a) and (b)]	\$ 0.00	\$ 0.00 13(c)
14. OTHER RECEIPTS (Dividends, Interest, etc.) (Schedule A-5)	\$ 0.00	\$ 0.00 14
15. OFFSETS TO OPERATING EXPENDITURES (Schedule A-6)	\$ 0.00	\$ 0.00 15
16. TOTAL RECEIPTS [add Lines 11(g), 12, 13(c), 14 and 15]	\$ 7,104.82	\$ 9,217.08 16
II. EXPENDITURES		
17. OPERATING EXPENDITURES (Schedule B)	\$ 8,646.40	\$ 9,217.08 17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (Schedule B-1)	\$ 0.00	\$ 0.00 18
19. LOAN REPAYMENTS:		
(a) Of Loans owed BY the Candidate/PCC or the Committee (Schedule E)	\$ 0.00	\$ 0.00 19(a)
(b) Of Loans owed TO the Candidate/PCC or the Committee (Schedule E-1)	\$ 0.00	\$ 0.00 19(b)
(c) Total Loan Repayments [add Lines 19(a) and 19(b)]	\$ 0.00	\$ 0.00 19(c)
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Organizations Other Than Political Committees (Schedule B-2)	\$ 0.00	\$ 0.00 20(a)
(b) Political Party Committees (Schedule B-3)	\$ 0.00	\$ 0.00 20(b)
(c) Other Political Committees and PACs (Schedule B-4)	\$ 0.00	\$ 0.00 20(c)
(d) Total Contribution Refunds [add Lines 20(a), (b), and (c)]	\$ 0.00	\$ 0.00 20(d)
21. OTHER EXPENDITURES		
(a) Independent Expenditures (Schedule B-5)	\$ 0.00	\$ 0.00 21(a)
(b) Offsets to Receipts (Schedule B-6)	\$ 0.00	\$ 0.00 21(b)
(c) Total Other Expenditures [add Lines 21(a), and 21(b)]	\$ 0.00	\$ 0.00 21(c)
22. TOTAL EXPENDITURES [add Lines 17, 18, 19(c), 20(d), and 21(c)]	\$ 8,646.40	\$ 9,217.08 22
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	1,541.58
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	7,104.82
25. SUBTOTAL (add Lines 23 and 24)	\$	8,646.40
26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)	\$	8,646.40
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	\$	0.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions, or for commercial purposes.

Full Name of Committee (Name of Candidate, if Candidate is reporting)

Holmes for Ward 8

1. Full Name, Mailing Address and Zip Code Kevin Holmes 19629 White Saddle Drive, Germantown, MD 20874	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/11/2016	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 50.00	
2. Full Name, Mailing Address and Zip Code Jefferson Cuffey 1264 Oates St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/12/2016	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 500.00	
3. Full Name, Mailing Address and Zip Code TIFFANY WILLIAMS 385 C RALPH MCGILL BLVD, ATLANTA, GA 30312	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/16/2016	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 350.00	
4. Full Name, Mailing Address and Zip Code Brenda Wharton 3604 Lochearn Drive, Gwynn Oak, MD 21207	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/22/2016	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 150.00	
5. Full Name, Mailing Address and Zip Code Brenda Wharton 3604 Lochearn Drive, Gwynn Oak, MD 21207	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/24/2016	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 200.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Holmes for Ward 8

6. Full Name, Mailing Address and Zip Code Mahogany Woodland 8951 Town Center Circle, Upper Marlboro, MD 20774	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/28/2016	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 50.00
7. Full Name, Mailing Address and Zip Code Brenda Wharton 3604 Lochearn Drive, Gwynn Oak, MD 21207	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/31/2016	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 250.00
8. Full Name, Mailing Address and Zip Code William Holmes 3604 Lochearn Drive, Gwynn Oak, MD 21207	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/31/2016	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 100.00
9. Full Name, Mailing Address and Zip Code LaDawne White 209 49th St NE, Washington, DC 20019	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 03/31/2016	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 250.00
10. Full Name, Mailing Address and Zip Code Emily Tatro 701 2nd St NE Apt 542, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/03/2016	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 250.00

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Holmes for Ward 8

11. Full Name, Mailing Address and Zip Code Jamie Trotter 2003 Clearwood Drive, Bowie, MD 20721	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/08/2016	Amount of Each Receipt This Period \$ 300.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 300.00	
12. Full Name, Mailing Address and Zip Code Jessica Carter 5441 Bass Place SE, Washington, DC 20019	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/08/2016	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 25.00	
13. Full Name, Mailing Address and Zip Code Williere Benjamin 1614 Isherwood St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/08/2016	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 50.00	
14. Full Name, Mailing Address and Zip Code Darrell Griffith 3718 Cooperville Way, Fort Washington, MD 20744	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/08/2016	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 25.00	
15. Full Name, Mailing Address and Zip Code Stephen Seh 925 25th St NW #114, Washington, DC 20037	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/08/2016	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 100.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Holmes for Ward 8

16. Full Name, Mailing Address and Zip Code Shonda Goward 1600 Maryland Ave NE #319, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/08/2016	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 50.00
17. Full Name, Mailing Address and Zip Code Shanita Cox 12203 Pleasant Prospect Rd, Bowie, MD 20721	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/09/2016	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 500.00
18. Full Name, Mailing Address and Zip Code Christopher Cox 12203 Pleasant Prospect Rd, Bowie, MD 20721	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/09/2016	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 500.00
19. Full Name, Mailing Address and Zip Code Francis McDobnough 25 Stiles Rd, South Yarmouth, MA 02664	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/10/2016	Amount of Each Receipt This Period \$ 28.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 28.00
20. Full Name, Mailing Address and Zip Code Tia Holmes 13010 Rhame Drive, Fort Washington, MD 20744	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/17/2016	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 25.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Holmes for Ward 8

21. Full Name, Mailing Address and Zip Code Steven Rosner 12706 Ginger Wood Lane, Clarksburg, MD 20871	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/21/2016	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 10.00
22. Full Name, Mailing Address and Zip Code Nicole Garner 6716 Edgemere Drive, Temples Hills, MD 20748	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/21/2016	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 50.00
23. Full Name, Mailing Address and Zip Code Blair Lockamy 8 Crisswell Court, Sterling, VA 20165	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/22/2016	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 50.00
24. Full Name, Mailing Address and Zip Code Jamie Trotter 2003 Clearwood Drive, Bowie, MD 20721	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/22/2016	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 500.00
25. Full Name, Mailing Address and Zip Code Brenda Wharton 3604 Lochearn Drive, Gwynn Oak, MD 21207	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/25/2016	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 300.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions, or for commercial purposes.

Full Name of Committee (Name of Candidate, if Candidate is reporting)

Holmes for Ward 8

26. Full Name, Mailing Address and Zip Code LaDawne White 209 49th St NE, Washington, DC 20019	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/25/2016	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 500.00
27. Full Name, Mailing Address and Zip Code Brenda Wharton 3604 Lochearn Drive, Gwynn Oak, MD 21207	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 04/30/2016	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 350.00
28. Full Name, Mailing Address and Zip Code Mahlet Ayalew 3003 Van Ness St NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/04/2016	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 250.00
29. Full Name, Mailing Address and Zip Code Jessica Carter 5441 Bass Place SE, Washington, DC 20019	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/04/2016	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 50.00
30. Full Name, Mailing Address and Zip Code Jasen Banks 3949 R St SE, Washington, DC 20020	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/06/2016	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 100.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Holmes for Ward 8

31. Full Name, Mailing Address and Zip Code Patricia Crawford 2300 Bright Leaf Way, Baltimore, MD 21209	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/06/2016	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 100.00	
32. Full Name, Mailing Address and Zip Code Darrell Holloman 15502 Symondsburry Way, Upper Marlboro, MD 20774	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/09/2016	Amount of Each Receipt This Period \$ 300.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 300.00	
33. Full Name, Mailing Address and Zip Code Suzanne Schick 5712 40th Avw, Hyattsville, MD 20781	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/10/2016	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 50.00	
34. Full Name, Mailing Address and Zip Code Vincent Stephens 11999 Beltsville Drive, Beltsville, MD 20705	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/13/2016	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 50.00	
35. Full Name, Mailing Address and Zip Code Jeffrey Holmes 3604 Lochearn Drive, Lochearn, MD 21207	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/13/2016	Amount of Each Receipt This Period \$ 10.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 10.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Holmes for Ward 8

36. Full Name, Mailing Address and Zip Code Sheba Cousins 1424 Howard Road SE, Washington, DC 20020	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/13/2016	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 50.00
37. Full Name, Mailing Address and Zip Code Derick Martin 8110 Holly Lane, Clinton, MD 20735	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/13/2016	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 50.00
38. Full Name, Mailing Address and Zip Code Ella Robinson 499 Illinois St, Suite 230, San Francisco, CA 94158	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/14/2016	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 100.00
39. Full Name, Mailing Address and Zip Code Brandon Cole 9305 Crystal Oaks Lane, Upper Marlboro, MD 20772	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/14/2016	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 100.00
40. Full Name, Mailing Address and Zip Code Willacy Knowles 81 Danbury St SW, Washington, DC 20032	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/17/2016	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 50.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Holmes for Ward 8

41. Full Name, Mailing Address and Zip Code Nadine McKee 11411 Lake Arbor Way #1208, Mitchellville, MD 20721	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/20/2016	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 25.00
42. Full Name, Mailing Address and Zip Code Brenda Wharton 3604 Lochearn Drive, Gwynn Oak, MD 21207	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/20/2016	Amount of Each Receipt This Period \$ 150.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 500.00
43. Full Name, Mailing Address and Zip Code Kevin Griffith 3718 Copperville Way, Fort Washington, MD 20744	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/27/2016	Amount of Each Receipt This Period \$ 150.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 150.00
44. Full Name, Mailing Address and Zip Code Darrell Griffith 3718 Cooperville Way, Fort Washington, MD 20744	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/29/2016	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 75.00
45. Full Name, Mailing Address and Zip Code Francis McDobnough 25 Stiles Rd, South Yarmouth, MA 02664	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/30/2016	Amount of Each Receipt This Period \$ 29.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 57.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Holmes for Ward 8

46. Full Name, Mailing Address and Zip Code Anthony Keith 2225 Kearny St NE Apt 6, Washington, DC 20018	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 05/31/2016	Amount of Each Receipt This Period \$ 150.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 150.00	
47. Full Name, Mailing Address and Zip Code Jacqueline Martin 3071 Chester Grove Road, Upper Marlboro, MD 20774	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/01/2016	Amount of Each Receipt This Period \$ 15.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 15.00	
48. Full Name, Mailing Address and Zip Code Tamika Barnes 6613 Atwood St #3, District Heights, MD 20747	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/03/2016	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 20.00	
49. Full Name, Mailing Address and Zip Code Allan Wharton 3604 Lochearn Drive, Lochearn, MD 21207	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/05/2016	Amount of Each Receipt This Period \$ 75.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 75.00	
50. Full Name, Mailing Address and Zip Code Martine Outlaw 8201 16th St Apt 1022, Silver Spring, MD 20910	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/09/2016	Amount of Each Receipt This Period \$ 170.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 170.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Holmes for Ward 8

51. Full Name, Mailing Address and Zip Code Yodit Asfaw 628 Symphony Woods Drive, Silver Spring, MD 20901	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/10/2016	Amount of Each Receipt This Period \$ 20.00
Contributor Type Individual	Occupation		
	Name and Address of Employer		
Aggregate Year-To-date			\$ 20.00
TOTAL This Period (Aggregate of all Receipt pages)			\$ 5,952.00

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Holmes for Ward 8

	Contribution Type	Date (month, day, year)	Amount of Each Receipt This Period
	<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	06/10/2016	\$ 1,152.82
	Aggregate Year-To-date		\$ 1,651.64

TOTAL This Period (Aggregate of all Receipt pages)

\$ 1,152.82

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FULL Name of Committee (Name of Candidate, if Candidate is reporting)

Holmes for Ward 8

1. Full Name, Mailing Address and Zip Code Bank of America 100 North Tryon St, Charlotte, NC 28255	Purpose of Expenditure Bank Fees	Date (month, day, year) 03/15/2016	Amount of Each Expenditure This Period \$ 5.00
Occupation	Name and Address of Employer		
2. Full Name, Mailing Address and Zip Code Aaron Holmes 1527 17th St. Se , Washington, DC 20020	Purpose of Expenditure Advertising	Date (month, day, year) 03/24/2016	Amount of Each Expenditure This Period \$ 350.00
Occupation	Name and Address of Employer		
3. Full Name, Mailing Address and Zip Code Aaron Holmes 1527 17th St. Se , Washington, DC 20020	Purpose of Expenditure Advertising	Date (month, day, year) 03/28/2016	Amount of Each Expenditure This Period \$ 100.00
Occupation	Name and Address of Employer		
4. Full Name, Mailing Address and Zip Code Bank of America 100 North Tryon St, Charlotte, NC 28255	Purpose of Expenditure Bank Fees	Date (month, day, year) 04/04/2016	Amount of Each Expenditure This Period \$ 15.00
Occupation	Name and Address of Employer		
5. Full Name, Mailing Address and Zip Code O'Brien Printing 324 Dorrance Street, Bristol, PA 19007	Purpose of Expenditure Printing	Date (month, day, year) 04/06/2016	Amount of Each Expenditure This Period \$ 1,222.20
Occupation	Name and Address of Employer		
6. Full Name, Mailing Address and Zip Code O'Brien Printing 324 Dorrance Street, Bristol, PA 19007	Purpose of Expenditure Printing	Date (month, day, year) 04/19/2016	Amount of Each Expenditure This Period \$ 761.00
Occupation	Name and Address of Employer		
7. Full Name, Mailing Address and Zip Code VistaPrint 95 Hayden Ave, Lexington, MA 02421	Purpose of Expenditure Printing	Date (month, day, year) 05/03/2016	Amount of Each Expenditure This Period \$ 41.73
Occupation	Name and Address of Employer		

8. Full Name, Mailing Address and Zip Code Rebekah Caruthers 1001 3rd St SW, Washington, DC 20024	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 05/03/2016	Amount of Each Expenditure This Period \$ 1,678.20
Occupation	Name and Address of Employer		
9. Full Name, Mailing Address and Zip Code O'Brien Printing 324 Dorrance Street, Bristol, PA 19007	Purpose of Expenditure Printing	Date (month, day, year) 05/10/2016	Amount of Each Expenditure This Period \$ 301.20
Occupation	Name and Address of Employer		
10. Full Name, Mailing Address and Zip Code Home Depot 6003 Oxon Hill Road, Oxon Hill, MD 20745	Purpose of Expenditure Campaign Materials	Date (month, day, year) 05/20/2016	Amount of Each Expenditure This Period \$ 161.78
Occupation	Name and Address of Employer		
11. Full Name, Mailing Address and Zip Code Aaron Holmes 1527 17th St. Se , Washington, DC 20020	Purpose of Expenditure Salary/Stipend	Date (month, day, year) 05/20/2016	Amount of Each Expenditure This Period \$ 501.20
Occupation	Name and Address of Employer		
12. Full Name, Mailing Address and Zip Code O'Brien Printing 324 Dorrance Street, Bristol, PA 19007	Purpose of Expenditure Printing	Date (month, day, year) 05/25/2016	Amount of Each Expenditure This Period \$ 2,304.40
Occupation	Name and Address of Employer		
13. Full Name, Mailing Address and Zip Code O'Brien Printing 324 Dorrance Street, Bristol, PA 19007	Purpose of Expenditure Printing	Date (month, day, year) 05/26/2016	Amount of Each Expenditure This Period \$ 954.69
Occupation	Name and Address of Employer		
14. Full Name, Mailing Address and Zip Code Sports Heaven USA 4245 Branch Ave, Temple Hills, MD 20748	Purpose of Expenditure Campaign Materials	Date (month, day, year) 06/07/2016	Amount of Each Expenditure This Period \$ 250.00
Occupation	Name and Address of Employer		
TOTAL This Period (Aggregate of all expenditure pages)			\$ 8,646.40